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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/925,046	
	Filing Date	August 8, 2001	
	First Named Inventor	Syed Hossainy	
	Art Unit	3731	
	Examiner Name	Bradford C. Pantuck	
Total Number of Pages in This Submission		Attorney Docket Number	ACS 54307 (2256P)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	FULWIDER PATTON LEE & UTETH, LLP
Customer No.	24201
Signature	
Date	May 7, 2004

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the			
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Signature			

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PTO/SB/17 (10-03)  
Approved for use through 07/31/2006. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$440.00

## Complete if Known

Application Number	09/925,046
Filing Date	August 8, 2001
First Named Inventor	Syed Hossainy et al.
Examiner Name	Bradford C. Pantuck
Art Unit	3731
Attorney Docket No.	ACS 54307 (2256P)

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	<b>3. ADDITIONAL FEES</b>	
<input type="checkbox"/> Money Order	<input type="checkbox"/> Other		
<input type="checkbox"/> None			
Deposit Account:		Large Entity   Small Entity	
Deposit Account Number: 06-2425		Fee Code   Fee (\$)	
Deposit Account Name: FULWIDER PATTON		Fee Code   Fee (\$)	
The Director is authorized to: (check all that apply)		Fee Description	
<input type="checkbox"/> Charge fee(s) indicated below		Fee Paid	
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<b>FEE CALCULATION</b>			
<b>1. BASIC FILING FEE</b>			
Large Entity   Small Entity			
Fee Code   Fee (\$)			
Fee Code   Fee (\$)			
Fee Description			
Fee Paid			
1001 770 2001 385 Utility filing fee			
1002 340 2002 170 Design filing fee			
1003 530 2003 265 Plant filing fee			
1004 770 2004 385 Reissue filing fee			
1005 160 2005 80 Provisional filing fee			
SUBTOTAL (1) (\$)			
<b>2. EXTRA CLAIM FEES FOR UTILITY AND</b>			
Extra Claims		Fee from below	
Total Claims -20** = 0 X = 0.00		Fee Paid	
Independent Claims -3** = 0 X = 0.00			
Multiple Dependent			
Large Entity   Small Entity			
Fee Code   Fee (\$)			
Fee Code   Fee (\$)			
Fee Description			
1202 18 2202 9 Claims in excess of 20			
1201 86 2201 43 Independent claims in excess of 3			
1203 290 2203 145 Multiple dependent claim, if not paid			
1204 86 2204 43 ** Reissue independent claims over original patent			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)		\$0.00	
**or number previously paid, if greater; For Reissues, see above			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	David G. Parkhurst	Registration No. (Attorney/Agent)	29,422
Signature		Telephone	310-824-5555
		Date	May 7, 2004

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